

## STATE OF DELAWARE Child Death Review Commission (CDRC) Policy and Procedure

#### **Sudden Death in the Young Case Registry**

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#### **Purpose:**

The primary purpose of conducting sudden death reviews in children as part of the Child Death Review (CDR) Sudden Death in the Young (SDY) panel system is to improve the identification, counting, review, and categorization of sudden unexplained child deaths. In addition, recommend prevention strategies that could alleviate practices or conditions which impact the lives of children on a state and national level.

The SDY panel was created via the Center for Disease (CDC) Sudden Death in the Young Registry. Its specific purpose is to investigate etiologies and risk factors for sudden death in the young including, Sudden Unexpected Infant Death (SUID), Sudden Cardiac Death (SCD) and Sudden Unexplained Death in Epilepsy (SUDEP).

#### **Policy:**

Per state statute, the Commission has the authority to investigate and review the facts and circumstances of all cases of child death. The definition of child death is defined as: *Death of children under the age of 18 and stillbirth occurring after at least 20 weeks gestation.* 

For the SDY panel, the review of the above mentioned cases will follow the CDC's Phase I of the SDY Registry which includes:

- The development of a surveillance system to identify cases of SDY.
- Create a registry of clinical information about each case and save a bio-specimen on each case.

SDY timeline for Phase I is from 2014 to 2018.

All activities of the SDY Panel are statutorily confidential and exempt from the Freedom of Information Act ("FOIA").

#### **Legislative Authority:**

31 Del. C. § § 320 - 324

#### **Definitions:**

<u>For SUDI Case Registry</u>: Sudden unexpected infant death as defined by the CDC as an infant death that occurs suddenly and unexpectedly, and whose cause is not immediately known before investigation. Cases must be a resident of the state reporting the death. Cases where manner of death is reported as homicide are excluded.

<u>For SDY Registry:</u> Death from birth through age 18 that occur suddenly and unexpectedly, and whose cause is not immediately known before investigation. Cases must be a resident of the state reporting the death. Cases where the manner of death (MOD) or cause of death (COD) is reported as any of the following are excluded:

- Accident in which the external cause was the obvious and only reason for the death, except infant suffocation.
- Homicide
- Suicide
- Accidental or intentional overdose of drugs even if this caused cardiac or respiratory arrest with no prior history of other possible chronic disease or autopsy findings suggestive of another cause.
- Terminal illness in which the death was reasonably expected to occur within six months.

### **Procedure**

#### **Notification of the death:**

- 1. The CDRC will receive notification of a child death from the following sources:
  - Division of Forensic Sciences-Medical Examiner (DFS-ME)
    - i. Anticipated Time Frame: Next business day after the death.
  - Investigation Coordinator (IC) from the Office of the Child Advocate
    - i. Anticipated Time Frame: Within five days of the incident.
  - Death Certificate from the Office of Vital Statistics
    - i. Anticipated Time Frame: Between 30 to 90 days of the death depending upon toxicology results from the DFS-ME.
  - Media article
    - i. Anticipated Time Frame: Varies
- 2. The DFS-ME and the CDRC will identify all Delaware resident SDY cases for autopsy protocol within 24 hours. Upon receipt of a death notification, the CDRC Executive Director (ED) shall determine within twenty-four hours whether or not the case will be assigned to the SDY panel or distributed to a different review panel of the CDRC. (Appendix 1)

- 3. The SDY surveillance autopsy protocol requires sampling consent and bio-repository consent that must be obtained from the family in a timely manner by a staff person at the DFS-ME in accordance with the CDC/SDY grant. (Appendix 2)
- 4. Upon determination of the screening decision, the ED shall immediately send an email notification to the CDRC Office Manager (OM), CDRC Records Technician (RT), and SDY Panel Chair. Reports that do not meet the above criteria for the SDY panel will be documented in the CDRC tracking database as rejected, transferred to the CDR panel, or transferred to the Fetal Infant Mortality Review panel by the Office Manager. Reports that meet criteria for review will follow the actions listed below.
- 5. If notified by death certificate the ED shall within 24 hours, complete a case disposition form (Appendix 3) and attach it to the death certificate. This disposition will be immediately forwarded to the OM.

#### CASE PREPARATION

#### Within 2 business days of the Disposition-via Email or Case Disposition Form

- 1. The OM shall complete the following activities:
  - Open the case in the National Center for Fatality Review and Prevention (NCFRP) database. This will create a case assignment number;
  - Open the case in the CDRC tracking database. This will include all highlighted blue columns:
  - Conduct a history search of previous cases that will be conducted in both databases at this time:
    - O This will include mother's first and last name and child's first and last name. This is completed to determine if there was a previous history and also ensure that the child's death was not previously entered if the case was not referred by death certificate but by other notification.
  - Email the new case number to the RT to start the subpoena process;
  - Create an electronic file folder under the shared drive folder SDY/caseload (last name, first name) where records and data sheets will be filed and maintained;
  - Complete the Review Cover Sheet (Appendix 4) to include a brief narrative from the email notification if possible and store in electronic case file;
  - Scan all death certificates (including the disposition form) into the electronic case file.
  - If it is a joint case review with the Child Protection Accountability Commission child abuse/neglect (CAN) panel, a copy of the death certificate will be scanned into the Office of the Child Advocate (OCA)/CDRC shared drive/Joint Case Review folder. In addition, an electronic case file will be kept under the SDY folder/caseload to ensure other staff has access as needed to the file.
    - o An email will be sent to the CAN panel child death review specialist stating that a death certificate has been received.

- 2. The RT will issue subpoenas for medical and mental health records, including the newborn records for the child and mother, primary care physician records, emergency medical services, emergency department records, and Department of Education (DOE) records if the child is of school age.
- 3. The due date for record return will be 30 calendar days. The RT shall monitor all subpoena requests for records to ensure receipt and shall contact the appropriate facility if the record is not received by the due date recorded on the subpoena. The RT will enter a due date into the CDRC subpoena tracking database to ensure the RT's consistent follow-up for records due. The RT shall conduct a weekly check of the subpoena tracking database and follow up of all outstanding records.
  - a. Within 24 hours upon receipt of medical records, the RT shall scan the records into the electronic case file. After ensuring that all pages were scanned correctly, the hard copy records shall be disposed in the locked confidential shredding bin.

#### Within 5 business days after the case disposition:

- 1. If applicable, the ED will consult with the OCA CAN Panel Director to determine if the case will be jointly reviewed with the CAN panel. If accepted by OCA, a review date will be scheduled not less than 2 months and not greater than 6 months from the referral date. The ED will mark this decision and scheduled date into the CDR tracking database.
  - b. Reports for sudden unexpected deaths of children in the state of Delaware under the age of 18 shall be screened in for a Joint Review in the following circumstances:
    - i. Substance abuse concerns were identified as a risk factor during the current criminal investigation and may have contributed to the death;
    - ii. Prior child death or near death that was unexplained or suspicious involving the suspects in the current criminal investigation; and,
    - iii. Other cases for good cause shown, where abuse or neglect is suspected and current or prior history with the Division of Family Services ("DFS") exists.
- 2. For a Joint Review with the CAN Panel, the OCA CAN Specialist will be responsible for preparing the case for review per the Memorandum of Agreement between OCA and CDRC (Appendix 5).

#### Within 30 business days of the disposition

- 1. The RT will review the Delaware Justice Information System (DELJIS) and the Law Enforcement Investigative Support System (LEISS) to obtain the status of the criminal investigation, complaint number and other details relevant to the review.
  - a. This informational update will be sent via secure egress email to the Executive Director.
- 2. The ED will conduct bi-monthly supervision with the contractual CDR Specialist to identify the cases that will be scheduled for the next scheduled SDY panel.
- 3. The ED will schedule the review date that is not less than 3 months from the date of death. A case that has pending prosecution as a delay, will be given a final end date of two years from the date of death.

- 4. The CDR Specialist shall distribute the Review Cover Sheet to the Panel within two days of the bi-monthly supervision and request electronic data sheets summarizing the circumstances surrounding the death and any history of involvement with the child or family. A due date for the cover sheet will be provided to the panel members.
- 5. The CDR Specialist will coordinate an electronic or in-person exchange with the Medical Abstractor and document the records exchanged (Appendix 6). If an SDY case needs medical specialist records and they are not received in time for the review within 90 days, the case may still be reviewed at the first level review. However, those medical records must be received by the scheduled advance panel review (see below for further explanation under panel review).
- 6. The CDR specialist shall separately request data sheets from law enforcement jurisdictions, which are not represented on the panel. The law enforcement representative will also be given the option to present the case in-person or by telephone.

#### 3 Weeks Prior to the Review

- 1. The CDR Specialist shall prepare an agenda (Appendix 7) with the cases identified for the next review. The ED shall review the agenda and draft meeting minutes prior to dissemination.
- 2. The completed data sheets must be submitted electronically three weeks prior to the scheduled review date. The CDR Specialist shall immediately issue a follow up request to individual members if the data sheets are not received by the specified date.
- 3. The Medical Abstractor shall submit the completed abstraction to the CDR Specialist (Appendix 8). The CDR Specialist shall immediately issue a follow up request if the abstraction is not received by the specified date.
- 4. The CDR Specialist will ensure that all records are gathered from the DFS-ME. Upon receipt, the records will be given to the OM for scanning the records into the electronic file within five days of receipt.

#### 2 Weeks Prior to Review

- 1. The CDR Specialist shall compile the review cover sheets, data sheets, medical abstraction, obituary, and news articles into packets for each case scheduled for initial review and provide this hard copy packet to the ED.
- 2. The ED shall review this packet and once approved will electronically disseminate the agenda, draft meeting minutes, and review materials through secure egress email to the panel. Attendance will be confirmed through this email notification.

#### 1 Week Prior to Review

1. The SDY Panel Chair and the CDR Specialist shall participate in a teleconference discuss the agenda and draft meeting minutes, to set timeframes for each case, to determine if additional witness testimony will be needed, and to address any concerns that may arise during the review.

2. The CDR Specialist shall prepare the confidentiality statement for each meeting and each panel member, witness, and invited professional shall be asked to sign the statement. (Appendix 9)

#### PANEL REVIEW

#### In General

- 1. First level reviews shall investigate the facts and circumstances surrounding the death and any history of involvement with the child or family by the agencies represented on the panel. This first level is meant to be one of a psychosocial overview which encompasses the first responder's child death scene response. This is tracked for the SDY CDC grant and also for future training needs.
  - a. First level panel reviews shall occur within 3 months of the notification to CDRC unless there is pending criminal investigation.
  - b. The meetings shall occur every other month from approximately 2:00 p.m. to 4:00 p.m. However, due to increased volume, the meeting times may be expanded. Meeting notices will be disseminated by the ED or the CDR Specialist one year in advance.
- 2. The purpose of the advanced panel review is to review specific cases with a greater attention to medical and other risk factors and to categorize the deaths based on the medical findings. If a child's COD is listed as undetermined, cardiac, or sudden unexpected death in Epilepsy (SUDEP) the case will be reviewed at the advanced panel level. The advanced panel consists of medical professionals including but not limited to the following: DFS-ME, Genetics, Cardiology, Neurology, Pulmonary, Pediatric Hospitalist, and the SDY panel chair.
  - a. Secondary advanced panel reviews shall occur within 6 months of the notification to the CDRC.
  - b. Advanced panel reviews shall occur on a quarterly basis from 7:30 a.m. to 8:30 a.m. at A.I. DuPont Hospital for Children.
- 3. A case that has pending prosecution as a reason for delay will be given a final completion date of two years from the date of death. If a review has not been cleared through authorization from the Office of the Attorney General or resolution of the criminal case, the case will be entered into the NCFRP database by the SDY panel chair. The ED will complete secondary quality assurance within 30 business days of this case being administratively closed by the panel chair. The case will not be presented at the Commission level. However, the aggregate data will be captured in the calendar year annual report.
- 4. In order for a case to be reviewed at a panel meeting, the agencies involved must be present or have a representative present who can discuss the case. The panel members

shall attend each scheduled meeting. If a panel member intends to send a proxy, the ED must be notified in writing prior to the meeting.

- a. If attendance becomes an issue of concern, the ED will consult with the panel member's designated Commissioner to determine if the individual needs to be replaced.
- 5. If appropriate and deemed acceptable by CDRC staff, a different law enforcement jurisdiction can present a different jurisdiction's case if necessary.
- 6. If essential information needed to complete a case review is not available, the case will be deferred until the next scheduled meeting. This decision will only be decided upon by the ED or designated CDRC staff member.
- 7. The CDRC SDY Panel Chair and ED shall attend the Joint Reviews with the CAN panel, when applicable.
- 8. Witnesses and invited professionals shall only be present for the discussion of facts relevant to his or her involvement in the case. Agency representatives may be authorized to attend in addition to the regularly scheduled member with prior approval from the ED.
- 9. SDY panel quorum shall constitute one-third of the Panel membership. A panel meeting can go forward without a quorum to honor time commitments for those in attendance. However, there must always be in attendance a medical person, Department of Services for Children, Youth and their Families (DSCYF) representative, and a Law Enforcement representative. A quorum must be present in order for any vote to be taken. Any action of the Panel shall be by a simple majority vote of the quorum. Each appointed member and the ED shall have one vote regardless of the number of representatives at the meeting. If a panel member has been directly involved with the case, they may participate in the discussion but must abstain from voting. Panel members not present for the entire review shall abstain from voting. The CDR Specialist will have no voting privileges.

#### **Panel Meeting (First and Advanced Level)**

- 1. The Panel members, witnesses, and invited professionals must comply with and sign the confidentiality statement prior to the reviews. Specific identifying case information shall remain confidential and restricted to the panel and Commission members. Confidentiality sheets are collected and maintained by the CDR Specialist.
- 2. The Panel Chair and ED shall determine if there is quorum and facilitate the reviews.
- 3. The Panel Chair and ED shall lead the discussion to help identify system findings.
- 4. The panel members must approve the draft minutes and findings with revisions when applicable, from the prior meeting. However, the minutes may be presented to the Commission without approval if necessary due to time constraints based upon the Commission quarterly schedule.

5. At the completion of a review, all panel members will turn over all hard copy documentation related to that review to CDRC staff for shredding of this confidential information. If they have the information electronically stored, they will be reminded to delete all information from their electronic storage.

#### **First Level**

- 1. For a SDY first level review, the panel members shall orally summarize their agencies' involvement with the child or family when applicable, participate in discussion, and identify system-wide findings.
- 2. At the conclusion of the first level case review, each case will be identified as completed and categorized according to the SDY Case Decision Algorithm (Appendix 10) or identified as needing to go the advanced level panel for review and categorization.

#### **Advanced Level**

- 1. The advanced level panel review team will do the following:
  - Provide an expert review of the medical information gathered.
  - Consult the expert pathologists about the autopsy and ancillary testing and determine whether further evaluation/testing are recommended.
  - Confirm the COD listed on the death certificate or suggest an alternative diagnosis.
  - Determine the likelihood that additional family members could be at risk and attempt to determine whether appropriate medical interventions for family members were identified or had been recommended.
  - Confirm that the family has been provided the opportunity to consent to research on a DNA bio-specimen, or that an appointment to discuss consent has been scheduled.
  - Re-visit the risk factors and findings identified by the first level SDY panel to determine whether any additional or amended findings are warranted.
  - Categorize each case using the SDY Case Decision Algorithm.

#### Within 2 Business Days after Panel Meeting (First and Advanced Level)

- 1. The ED shall refer cases to the Division of Professional Regulation (DPR) for unprofessional conduct as found under the Medical Practice Act and the Attorney General's Office for failure to report as found under 16 <u>Del. C.</u> § 903, when applicable. The ED must also provide an update to the panel at the next meeting.
- 2. The ED shall report any imminent child safety concerns or egregious employee performance issues identified by the panel to the appropriate agency contact, when applicable. The ED must also provide an update to the panel at the next meeting.

#### Within 5 Business Days after Panel Meeting

#### **First Level**

1. If a case has been categorized according to the SDY Case Decision Algorithm to go to the advanced level panel review, the next scheduled meeting date will be assigned to this case and entered into the CDR Tracking Database by the ED.

#### First Level and Secondary Level

- 2. The ED shall update the CDR tracking database to reflect that the review has occurred and to identify the next steps for the case.
- 3. The CDR specialist will provide the OM with the confidentiality sheets. The OM will scan the confidentiality sheets into the shared drive and place into the monthly SDY packet folder.
- 4. At the completion of the case review the SDY panel chair will complete the Case Review Documentation Sheet (Appendix 11). A copy of this documentation sheet will be sent via to the CDR Specialist. The CDR Specialist will save this document to the shared drive/SDY/Caseload.

#### Within 15 Business Days after Panel Meeting

- 1. The CDR Specialist shall be responsible for drafting the confidential meeting minutes, which are exempt from the FOIA. The minutes will summarize the information presented by the panel members, any discussion, information needed for the final review, when applicable, agency strengths and system-wide findings identified by the panel. The draft minutes shall be approved by the panel at the next meeting. The CDR Specialist shall also make the necessary revisions to the minutes from the prior meeting when applicable, and finalize the approved minutes.
- 2. The ED will enter the aggregate data obtained from the reviews into the CDR tracking database.
- 3. The SDY Medical Record Abstractor will enter all data from the case review into the secure NCFRP database tool.

#### Within 45 Business Days after Panel Meeting

1. The ED will conduct a quality assurance review of the cases entered by the SDY Medical Record Abstractor. After this is completed, the case is considered finalized for purposes of the CDC grant.

#### **Quarterly Commission Meeting**

1. The SDY Panel Chair shall present the meeting minutes from the previous quarter for the first level and advanced level panels for approval to the Commission. The SDY Panel Chair will focus the presentation on findings and issues that need attention or action by the Commission. All case review information shared at the Commission meeting is statutorily confidential and exempt from the Freedom of Information Act (FOIA).

- 2. The Executive Director shall also provide a report on the caseloads of the SDY Panel (Appendix 12).
- 3. The Commission shall vote upon the minutes, findings, and any recommendations made by the Commissioners during the discussion of the cases.

#### Within 2 Business Days after the Quarterly Commission Meeting

- 1. The ED shall refer cases to the Division of Professional Regulation (DPR) for unprofessional conduct as found under the Medical Practice Act and the Attorney General's Office for failure to report as found under 16 <u>Del. C.</u> § 903, when applicable. The ED must also provide an update to the panel at the next meeting.
- 2. The ED shall report any imminent child safety concerns or egregious employee performance issues identified by the panel to the appropriate agency contact, when applicable. The ED must also provide an update to the panel at the next meeting.

#### Within 5 Business Days after Quarterly Commission Meeting

1. The ED will send the list of closed cases to the OM to close the approved cases in the CDR tracking database and move the electronic file to the closed case load folder.

#### Within 10 Business Days after Quarterly Commission Meeting

1. The SDY Medical Abstractor will enter any additional case information, findings, or recommendations to the NCFRP database tool under the narrative section.

#### Within 30 Business Days after Quarterly Commission Meeting

- 1. The CDR Specialist shall be responsible for drafting the Quarterly Commission Meeting minutes.
- 2. All data and other related review materials will be stored in a secure file maintained electronically.



# Memorandum of Understanding Between The Division of Forensic Science (DFS-ME) and the Child Death Review Commission (CDRC)

#### Part I

<u>Purpose</u>: This Memorandum of Understanding (MOU) clarifies the roles, responsibilities and collaborative relationships with the Division of Forensic Science and the Child Death Review Commission for the implementation of the Sudden Death in the Young (SDY) registry.

#### Part II

#### **Authority:**

#### CDRC -

The Child Death Review Commission has the authority to review all deaths of children under the age of 18, and stillbirths occurring after at least 20 weeks of gestation and maternal death are reviewed, in order to provide recommendations to alleviate those practices or conditions which impact the mortality of children and pregnant women, by the authority of Title 31, Chapter 3 of the Delaware Code, Subchapter II, Paragraphs 320, 321, 322, 323, 324.

**DFS-ME**-- The Division of Forensic Science has the authority and mandate to investigate cases that are enumerated in Title 29. Section 4706.

#### Part III

#### The *DFS-Me* agrees to:

1. Identify all SDY Registry cases<sup>1</sup> within 24 hours and continue to follow the standardized autopsy protocol.

November 18, 2016

<sup>&</sup>lt;sup>1</sup> SDY is defined as any death of an infant, child, or young adult, investigated by the medical examiner or coroner office, *except* homicides, suicides, overdoses, poisonings, or as passengers in motor vehicle accidents.

- 2. Notification of all child deaths to CDRC during the next business day. This will be completed via email. This will include child's name, parent's name, date of birth and date of death.
- 3. Work with the SDY Registry, to submit certain cases for DNA sampling as paid for by the grant. This will occur once Delaware IRB approval is granted.
- 4. Implement a process to obtain a standardized consent form from families of all SDY Registry cases for permission to collect a bio specimen, conduct a family interview and possibly contact the family in the future regarding participation in research on SDY. This will occur once Delaware IRB approval is granted.
- 5. Continue collaboration with the child death review process by providing the autopsy report, investigative report, other pertinent information (as agreed upon by DFS-ME and CDRC) and attendance (when available) at the child death review meeting.

#### Part IV

#### The CDRC agrees to:

- 1. Provide a casual/seasonal part-time individual to assist the DFS-ME with clerical support in regards to information needed for the SDY child death review panel.
- 2. Pay for all DNA sampling once IRB approval is granted.
- 3. Pay for all travel costs for two DFS-ME employees for the Reverse Site Visit in Atlanta at the CDC.
- 4. Provide training on SDY registry in collaboration with the CDC at the DFS-ME office.

#### Part V

#### **Both entities agree to:**

1. Promote collaboration and development of a child death scene and near death investigation multi-disciplinary training as developed by the Child Protection Accountability Commission's Child Abuse/Neglect Best practices joint workgroup. This will be paid for from the SDY grant funds.

#### Part VI

This agreement remains in effect until one of the partners notifies the other of a need for amendment.

#### SDY (Sudden Death in the Young) Tip Sheet

State of Delaware Department of Safety and Homeland Security Division of Forensic Science

**<u>Purpose:</u>** To determine based off when an initial report of a death of a child is received, if the child is eligible to be entered into the SDY Registry Process.

#### **Key Decision Making Information:**

- Decedent less than the age of 18
- The child a RESIDENT of the State of Delaware?
- Death is UNEXPECTED and NOT the result of any of the following:
  - O Accident where the external cause is the obvious and only reason for the death. Cases in which the underlying cause of the accident (e.g. drowning, infant suffocation, drivers in motor vehicle crashes, etc.) may be cardiac or neurological in origin should not be considered an 'accident in which the external cause was the obvious and only reason for the death'
  - o Homicide
  - o Suicide
  - Accidental or intentional OD
    - Terminal illness in which death was reasonably *expected* to occur within 6 months EXCEPT the child had a chronic illness or recent medical procedure but was *not* expected to die within the next 6 months.

If you have determined that this case meets the above criteria please contact the SDY representative through phone or email and make them aware of the impending case. Also, include in the DIA notification that this will be an SDY case to remind the pathologist to collect samples.

#### **During the initial investigation:**

- Complete the SUIDI form when appropriate
- When interviewing parents, provide the parents with the SDY booklet, and advise them that a representative from the SDY will be contacting them to set up a meeting to discuss registering their child with the SDY Case Registry.

#### Once the decedent has come to the DFS for exam:

- Review the SDY Registry Process and Decision Making Algorithm. The steps following the initial investigation are determined by certain factors that can lead the SDY Registry down multiple paths for classification.

Informed Consent
THE SUDDEN DEATH IN THE YOUNG CASE REGISTRY:
RESEARCH, DNA BANKING AND DIAGNOSTIC TESTING
Please click here for the consent booklet.



Disposition of Referrals		
Date:	<u>Actions</u>	
Assigned by FIMR Program Coordinator Assigned by Executive Director		
Assign to FIMR Fetal Death DOD Infant Death		
Assign to Triage Case (based upon odd/even) <sup>2</sup> Fetal Death  DOD  Infant Death	<ul> <li>Log into excel database</li> <li>Log into NFIMR if fetal/infant for FIMR</li> </ul>	
Assign to MMR	Log into excel database	
Assign to CDR	<ul> <li>Log into excel database</li> <li>Log into National CDR</li> <li>Create a folder under shared drive/caseload.</li> <li>Scan death cert to that folder</li> </ul>	
Assign to SDY	<ul> <li>Log into excel database</li> <li>Log into National CDR</li> <li>Create a folder under shared drive/caseload.</li> <li>Scan death cert to that folder</li> </ul>	
Joint Review with CAN and specified panel3	<ul> <li>Log into excel database</li> <li>Log into National CDR</li> <li>Create a folder under shared drive/caseload.</li> </ul>	

<sup>&</sup>lt;sup>2</sup> January through June based upon even DOD, July through December based upon odd DOD.

<sup>3</sup> This case gets entered into the national data tool with a CAN case# and a file is opened but no records are subpoenaed.

	<ul> <li>Email the death cert to OCA/Angela Birney</li> <li>Scan death cert to the CDRC folder and also the OCA folder.</li> </ul>
Out of State (log into tracking database and place in folder).Referred to another state?	
Pending (Re-submit to Executive Director monthly until a disposition can be given). Office Manager will keep in a 30 day review file.	
Child is over age 18. Place in designated file.	



## Sudden Death in the Young Registry Death Review Cover Sheet

<b>County:</b>	_ ID Number:
<b>DECEDENT'S INF</b>	ORMATION:
Child's Name:	
Child's Residence:	
DOB: Gender:	Race: Ethnicity:
Date of Death:	Age at time of Death:
Certification Date:	
Manner of Death:	
Cause of Death 1	
Cause of Death 2	
Cause of Death 3	
<b>Brief Case Scenario:</b>	
Family Information:	
Mother's Name:	DOB:
Address:	
List any alias use	ed, including maiden name:
, a, a	,
Father's Name:	DOB:
Address:	202.
List any alias use	rq.
List arry arias asc	
1/	·
Known Agency Invo	<u>ivement:</u>
Other:	

## State of Delaware MEMORANDUM OF AGREEMENT

#### Between

Office of the Child Advocate & Child Death Review Commission

## AGREEMENT FOR: THE JOINT REVIEW OF CHILD ABUSE OR NEGLECT DEATHS

#### Part I

<u>Purpose</u>: This Memorandum of Agreement ("MOA") clarifies the roles, responsibilities and collaborative relationships between the Office of the Child Advocate ("OCA") and the Child Death Review Commission ("CDRC") regarding the joint review of certain child abuse and neglect deaths in the State of Delaware (hereinafter "Joint Reviews"). Joint Reviews shall include CAN Panel members, CDRC staff and the Sudden Death in the Young ("SDY") Panel Chair.

#### Part II

#### **Authority**:

#### CDRC-

The Child Death Review Commission has the authority to review all deaths of children under the age of 18, except deaths of abused or neglected children which are within the jurisdiction of the Child Protection Accountability Commission under subchapter III, Chapter 9 of Title 16, all stillbirths occurring after at least 20 weeks of gestation, and all maternal deaths, in order to provide recommendations to alleviate those practices or conditions which impact the mortality of children and pregnant women. 31 <u>Del. C.</u> § 320-324.

**OCA** as staff to CPAC - The Child Protection Accountability Commission ("CPAC") is staffed by OCA. 16 <u>Del. C.</u> 931(c). CPAC is charged with investigating and reviewing deaths or near deaths of abused or neglected children. 931(b)(7). CPAC must coordinate with CDRC to provide statistics and other necessary information related to these investigations. 931(b)(8). CDRC may also review child abuse or neglect deaths for good cause shown as determined by the Commissions. 932(d).

#### Part III

#### **OCA** agrees to:

1. Notify CDRC upon knowledge of any child death if CDRC was not notified by the Investigation Coordinator's Office.

- Determine if the child abuse or neglect death requires a Joint Review with CDRC. Joint Reviews shall only be required for sudden unexpected deaths in the following circumstances:
  - a. Substance abuse concerns were identified as a risk factor during the current criminal investigation and may have contributed to the death;
  - b. Prior child death or near death that was unexplained or suspicious involving the suspects in the current criminal investigation; and,
  - c. Other cases for good cause shown, where abuse or neglect is suspected and current or prior history with the Division of Family Services exists.
- 3. Notify CDRC if the case was accepted for a Joint Review. This email notification will be sent to the CDRC Executive Director by the OCA Family Services Program Support Supervisor.
- 4. Subpoena and gather all records pertaining to any case that will be jointly reviewed, and save records, including the medical record abstraction, to the OCA/CDRC shared folder titled Joint Reviews.
- 5. Assign the medical record abstraction to the contractor under OCA. Upon completion of the abstraction, send an invoice to the CDRC Executive Director.
- 6. Schedule the Joint Reviews in coordination with CDRC.
- 7. Notify the CAN Panel when Joint Reviews will occur.
- 8. Disseminate information to the CAN Panel members, CDRC staff and the SDY Panel Chair.
- 9. Prepare the confidential minutes and public findings from the Joint Reviews.
- 10. Provide CDRC with statistics and other necessary information as needed.

#### Part IV

#### **CDRC** agrees to:

- 1. Notify OCA upon knowledge of any child death which meets the above listed criteria. This email notification will be sent to the OCA Family Services Program Support Supervisor by the CDRC Executive Director.
- 2. Save records on any case that will be jointly reviewed to the OCA/CDRC shared folder titled Joint Reviews.
- 3. Pay all invoices associated with the medical record abstraction for Joint Reviews.
- 4. Notify the SDY Panel Chair of the Joint Reviews.
- 5. Attend the Joint Reviews and ensure complete case information is entered into the National Fatality Review Case Reporting Tool.
- 6. Prepare brief reports for CDRC Meetings after these reviews have occurred.

#### Part V

#### Both organizations agree to:

- 2. Collaborate and discuss all child deaths in which child abuse or neglect is suspected in order to effectively review the case from a systems perspective.
- 3. Meet annually to review the public findings from all CAN Panel Reviews.

#### Part VI

This agreement remains in effect until one of the partners notifies the other of a need for amendment.



Date delivered:

<u>Name</u>	<u>Case</u> <u>Number</u>	Records Delivered	Date <u>Returned</u>	Comments (additional records subp
		1		

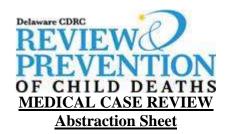


#### Sudden Death in the Young Panel <u>DATE</u> Agenda

Closed to the public as set forth in 31 Del.C. §324

- I. CALL TO ORDER
- II. WELCOME AND INTRODUCTIONS
- III. ANNOUNCEMENTS
- IV. APPROVAL OF MINUTES FROM DATE
- V. CASE REVIEWS

1.	Case Number:	Case Name:	Cause of Death:	
			Manner of Death:	
			DOB:	
			DOD:	
Di	iscipline	Responsible Party	Items Needed	
Medical			Death Event	
			System Concerns/Questions	
Medical Exa	miner			
Public Healt	h/CDW		Involvement with Public Health/CDW	
			Findings/Strengths	
DSCYF			History	
			Current Case Status	
Family Court	t		Summary of Court Findings	
Law Enforce	ment	Jurisdiction/Complaint	int Scene Investigation Completed?	
		#	Photo's of Scene Taken?	
			Toxicology Screen Completed? Results Received?	
DOE				
			<u>I</u>	



Completed By:
Date:
Records reviewed from the following:
Family Demographics
Child's Name:
Case #:
Insurance:
Date of Birth:
Incident Date:
Date of Death:
Mother's Name:
Date of Birth:
Father's Name:
Date of Birth:
Developmental History:
Nutritional History:
Social History:
Family History:
<b>History of Event and Hospital Course</b>
Admitting Hospital:
In-Hospital Attending:
Consults:
Diagnosis:
Procedures:
Imaging:
Primary Care

Provider:

<b>Past</b>	Medical	History	<b>/:</b>
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Immunizations:

Hospitalizations:

Operations:

Accidents:

Medications

Allergies:

#### **Prenatal History**

Number of OB Visits:

Complications during pregnancy?

#### **Birth History**

Mother's age and Gravida/Para:

Birth History:

Birth hospital: Gestational Age:

Birth Weight and Length:

APGARs:

Was unsafe sleeping education documented?

Was the "All babies cry"/parent abusive head trauma education documented?

If premature baby, was a car seat testing/fitting completed?

Was Mom tested for substance abuse at the hospital?

Was the baby also tested for substances at the hospital?

If Yes to either question, was a home visiting referral completed? (yes/no).

If Yes was DFS contacted?

Was a medical plan of safe care completed by the hospital or DFS?

#### **Autopsy**

#### **Additional Information**



## Child Death Review Commission (CDRC) Confidentiality Statement Sudden Death in the Young (SDY) Review Panel

The purpose of the child death review process is to conduct a complete assessment of child death incidents. In order to assure an assessment that fully addresses all systemic concerns, panel members must have access to all existing records on the child. These records include protective services records, public health records, court documents, law enforcement records, autopsy and medical examiner reports, mental health records, hospital or medical related data, and any other information that may have a bearing on the involved child and family.

With the purpose of this review in mind, we the undersigned agree that all information secured, verbally or in writing, in these reviews will remain confidential and will not be used for any purpose outside of the review process. 31 Del. C. § 324

#### **Date of Review:**

Print Name	Signature	Agency

Please click <u>here</u> for the CDC SDY Categorization Algorithm

November 18, 2016



## Sudden Death in the Young Registry Case Review Documentation Sheet

ID: Child's Name: General Discussion:	Date:	
Deferred: Additional Information Needed:	Review Decision	
SIDS/SUDI Case Risk Factors:  Findings/Follow-up Needed: Issues of concern to be tracked:		



SDY ages	
12 months and under	
age 1-4	
age 5-12	
age 13-17	
Total	

SDY Demographics	
Race	
Black	
White	
Hispanic	
Sex	
Male	
Female	
County	
New Castle	
Kent	
Sussex	

Cases Completed at panel	
1st Level complete	
1st and 2nd level complete	
Total	

SDY Type of Death	
Total	